

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/561596

BEST AVAILABLE COPY

CLAIMS AS FILED - PART I

| | | (Column 1) | (Column 2) |
|----------------------------------|----|---|--|
| U.S. NATIONAL STAGE FEES | | | |
| BASIC FEE | | SMALL ENT. = \$ 150 | LARGE ENT. = \$ 300 |
| EXAMINATION FEE | | Satisfies PCT Article 33(1)-(4) = \$ 50 / \$ 100 | All other situations = \$ 100 / \$ 200 |
| SEARCH FEE | | U.S. is ISA = \$ 50 / \$ 100 ALL other countries = \$ 200 / \$ 400 | All other situations = \$ 250 / \$ 500 |
| FEE-FOR-EXTRA-SPEC. PGS. | | minus 100 = | 150 = |
| TOTAL CHARGEABLE CLAIMS | 32 | minus 20 = | 12 |
| INDEPENDENT CLAIMS | 3 | minus 3 = | — |
| MULTIPLE DEPENDENT CLAIM PRESENT | — | — | <input type="checkbox"/> |

* If the difference in column 1 is less than zero, enter "0" in column 2

| SMALL ENTITY TYPE | OTHER THAN SMALL ENTITY |
|-------------------|-------------------------|
| RATE | FEES |
| BASIC FEE | |
| EXAM. FEE | |
| SEARCH FEE | |
| X \$ 125 = | X \$ 250 = |
| X \$ 25 = | X \$ 50 = |
| X \$ 100 = | X \$ 200 = |
| +\$ 180 = | +\$ 360 = |
| TOTAL | TOTAL |

CLAIMS AS AMENDED - PART II

| | | (Column 1) | (Column 2) | (Column 3) |
|--|----------|---|------------|---|
| AMENDMENT A | 12-20-05 | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| | 32 | Minus | ** 32 | = 0 |
| Independent | 3 | Minus | *** 3 | = 0 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | <input type="checkbox"/> |

| SMALL ENTITY | OTHER THAN SMALL ENTITY |
|---------------------|----------------------------|
| RATE | ADDITIONAL FEE |
| X \$ 25 = | X \$ 50 = |
| X \$ 100 = | X \$ 200 = |
| +\$ 180 = | +\$ 360 = |
| TOTAL ADDIT. FEE | TOTAL ADDIT. FEE |

| | | (Column 1) | (Column 2) | (Column 3) |
|--|--|---|------------|---|
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| | | Minus | ** | = |
| Total | | Minus | ** | = |
| Independent | | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | <input type="checkbox"/> |

| ADDITIONAL FEE | ADDITIONAL FEE |
|---------------------|---------------------|
| X \$ 25 = | X \$ 50 = |
| X \$ 100 = | X \$ 200 = |
| +\$ 180 = | +\$ 360 = |
| TOTAL ADDIT. FEE | TOTAL ADDIT. FEE |

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.